

SECTION IV.11. Program for All-inclusive Care for the Elderly (PACE)

A. Definition

Programs of All-inclusive care for the Elderly (PACE) are pre-paid, capitated programs for Medicare only, Medicare and Medicaid and private pay individuals who elect to enroll. The purpose of the PACE program is to provide pre-paid, capitated, comprehensive health care services. The PACE benefit package includes for all participants, regardless of source of payment, all Medicaid covered services as specified in the State's approved Medicaid plan, Medicare services, and services deemed necessary by the interdisciplinary team.

B. PACE Eligibility

To be eligible for PACE, an individual must:

1. Be at least 55 years old
2. Live in one of the following areas:
 - i. Chittenden County
 - ii. Rutland County
 - iii. Southern Grand Isle County (South Hero, Grand Isle),
3. Meet clinical eligibility criteria for nursing facility level of care
4. Be certified eligible for long-term care Medicaid by the Department of Children and Families or be able to privately pay
5. Be able to live safely in the community with services from PACE

The same procedures will be used to determine clinical and Medicaid financial eligibility as defined in Section II of this manual.

C. PACE Services

At a minimum the PACE organization must provide the following benefit package:

1. Interdisciplinary team assessment and treatment planning
2. Primary care services including physician and nursing services;
3. Social work services;
4. Restorative therapies, including physical therapy, occupational therapy and speech-language pathology;
5. Personal care and supportive services;
6. Nutritional counseling;
7. Recreational therapy;
8. Transportation;
9. Meals;
10. Medical specialty services including but not limited to: anesthesiology, audiology, cardiology, dentistry, dermatology, gastroenterology, gynecology, internal medicine, nephrology, neurosurgery, oncology, ophthalmology, oral surgery, orthopedic surgery, otorhinolaryngology, plastic surgery, pharmacy consulting services, podiatry,

- psychiatry, pulmonary disease, radiology, rheumatology surgery, thoracic and vascular surgery, and urology
11. Laboratory tests, x-rays and other diagnostic procedures
 12. Drugs and biologicals
 13. Prosthetics and durable medical equipment, corrective vision devices such as eyeglasses and lenses, hearing aids, dentures and repairs and maintenance for these items
 14. Acute inpatient care: ambulance; emergency room care and treatment room services; semi-private room and board; general medical and nursing services; medical surgical/intensive care/coronary care unit, as necessary; laboratory tests, x-rays and other diagnostic procedures; drugs and biologicals; blood and blood derivatives; surgical care, including the use of anesthesia; use of oxygen; physical, occupational, and respiratory therapies; speech-language pathology; and social services.
 15. Nursing facility care: semi-private room and board: physician and skilled nursing services; custodial care; personal care and assistance; drugs and biologicals; physical, occupational, and recreational therapies and speech-language pathology, if necessary; social services; and medical supplies and appliances.

D. PACE Procedures

If the individual has determined they want to enroll in PACE the Long-Term Care Clinical Coordinator will notify the PACE organization. The PACE organization will be responsible for assessing eligibility for PACE. If the individual is eligible for PACE and wants to enroll in PACE, the PACE organization will assist with the financial eligibility process and provide necessary coordination of services.

Effective Date of Enrollment:

The PACE payment is prospective payment that is effective from the first day of the month to the last day of the month. Enrollment for PACE participants is effective the first day of the month. Disenrollment is effective the last day of the month. However, notification must be submitted to the Department of Children and Families on (Form Number#) that the individual desires to enroll in PACE and is clinically and financially eligible by the 15th of the previous month so enrollment is effective on the first of the month.

Operational Protocols:

Operational Protocols for PACE Vermont are described in the PACE program agreement. The PACE program agreement is an agreement with CMS and the State administering agency for the operation of a PACE program under Medicare and Medicaid.